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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

☑ Declaration Submitted with Initial

Filing

OR

Declaration
Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Nur	nber	CV01148K					
First Named Inventor		CHACKALAMANNII					
COMPL	ETE IF	KNOWN					
Application Number		/ .					
Filing Date			_				
Group Art Unit	To Be Assigned						
Examiner Name	Tol	Be Assigned					

As a below named inventor, I hereby declare that:								
My residence, post office address, and citizenship are as stated below next to my name.								
I believe I am the original, first and sole inventor (if only one name is listed below) or an original first and take inventor (if only one name is listed below) or an original first and take inventor (if only one name is listed below).								
names are listed below) or the subject matter which is claimed and for which a patent is sought on the invention entitled:								
XANTHINE PHOSPHODIESTERASE V INHIBITORS								
the specification of which (Title of the Invention)								
is attached hereto OR								
was filed on (MM/DD/YYYY)	as Unit	ted States Applica	tion Number or PCT International				
Application Number and was amended on (MM/DD/YYYY) (if applicable).								
I hereby state that I have reviewed	and understand the	contents of the phase ide						
amended by any amendment speci	ically referred to ab	ove.						
I acknowledge the duty to disclose i	nformation which is	material to patentability as	s defined in 37 CF	R 1.56.				
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or Inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.								
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO				
Additional foreign application num	bers are listed on a	Supplemental priority date	short PTO/SP/n	20 amash ad bassa				
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto: I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.								
Application Number(s) Filing Date (MM/DD/YYYY)								
60/233,567	O9/19/2000 Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.							

(Page 1 of 2)

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CER	TIFICATE OF MAILING	
I hereby certify that this correspondence is bein envelope addressed to: Assistant Commissione	g deposited with the United States Postal Service as first class mail in r for Patents, Washington, D.C. 20231 on this date:	an
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DECLARATION — Utility or Design Patent Application

I hereby claim United States	n the benefit under 35 U.S.C. 120 s of America, listed below and in	of any United S sofar as the su	tates appli	cation(s), or	365(c) of any PC	T internation	onal application on is not disclos	designating the	
information w	or PCT International application in thich is material to patentability as nal or PCT international filing date	defined in 37	CED 1 SE						
	J.S. Parent Application or Number		t Filing Date	P	arent Paten (if applic				
							(<i></i>	
Additiona	II U.S. or PCT international applica	ition numbers a	re listed on	a suppleme	ental priority data	sheet PTO/	SB/02B attached	1 hereto.	
As a named in	ventor, I hereby appoint the follow k Office connected therewith:	ing sociatored a		s) to prosec	ute this applicatio	n and to tra	nsact all busines	s in the Pater	
		OR		24265		——⊳	Place Cu Number B		
	<u>_</u>		ctitioner(s) tration	name/regis	tration number list	ted below	Labell	hera	
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	registered practitioner(s) named of	n supplemental	Registered	Practitione	r Information she	et PTO/SB/	02C attached he	reto.	
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punishable by	re that all statements made herei true; and further that these state fine or imprisonment, or both, un ny patent issued thereon.	n of my own kr ments were ma der 18 U.S.C.	nowledge a ade with th 1001 and	are true and ne knowledg that such w	that all statemer that willful falso willful false statem	nts made o e statemen ents may	on information a ts and the like : leopardize the v	nd belief are so made are alidity of the	
Name of Sc	ole or First Inventor:			A peti	tion has been fi	led for this	s unsigned inv	entor	
Giv	ven Name (first and middle [if	any])		-Ý-	Family I	Name or S	Sumame		
SAMUEL				CHAC	KALAMAN	NIL			
Inventor's Signature	my Char	Killing				-	Date	8/23/0	
Residence: C	IN EAST BRUNSWIC	CK State	Ø1	Country	U.S.A.		Citizenship	U.S.A.	
Post Office Ad	Idress 79 STRATFORD	AVENUE							
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City E	AST BRUNSWICK State	NEW JERSEY	ZIP	08816		Country	U.S.A.		
Additional i	inventors are being named on	the 1 sun	plemental	Additiona	Inventor(e) ch	eat/c\ DT/			

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page _1_ of _1_

Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor								
Given Name (first and middle [if a	\Box	Far	nily Name o	r Sumame				
YUGUANG] w	'ANG						
Inventor's Signature			Date 8/23/01					
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CRAIG D. BOYLE								
Inventor's Signature	Date 8 23/0/							
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Mailing Address 13 MILL LANE	_							
Mailing Address								
city BRANCHBURG	St	ate NJ		ZIP 08876	Co	untry U.S.A.		
Name of Additional Joint Inventor, if a	ny:			A petition has been	filed for thi	s unsigned inventor		
Given Name (first and middle [if any	1)			F	amily Name	or Surname		
ANDREW W.	STAMFORD							
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Mailing Address 27 OVERLOOK ROAD								
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